

LSU Health Care Services Division

Comparison of Budgeted to Total Recommended

| Means of Financing & Table of Organization | Existing Oper Budget as of 12/02/03 | Recommended FY 2004-2005 | Total Recommended Over/ Under EOB |
|--|---|-----------------------------|--------------------------------------|
| General Fund (Direct) | \$68,121,034 | \$65,647,765 | (\$2,473,269) |
| Total Interagency Transfers | 0 | 0 | 0 |
| Fees and Self-generated Revenues | 0 | 0 | 0 |
| Statutory Dedications | 0 | 0 | 0 |
| Interim Emergency Board | 0 | 0 | 0 |
| Federal Funds | 0 | 0 | 0 |
| Total | \$68,121,034 | \$65,647,765 | (\$2,473,269) |
| T. O. | 0 | 0 | 0 |



LA Health Care Services Division



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|--|---|-----------------------------|--------------------------------------|
| General Fund (Direct) | \$68,121,034 | \$65,647,765 | (\$2,473,269) |
| Total Interagency Transfers | 0 | 0 | 0 |
| Fees and Self-generated Revenues | 0 | 0 | 0 |
| Statutory Dedications | 0 | 0 | 0 |
| Interim Emergency Board | 0 | 0 | 0 |
| Federal Funds | 0 | 0 | 0 |
| Total | \$68,121,034 | \$65,647,765 | (\$2,473,269) |
| T. O. | 0 | 0 | 0 |

Executive Administration and General Support

Central staff arm of the health care services division, assisting the governing board and each medical center with information, technical assistance and administrative support. This office provides support to the hospitals in the areas of fiscal services, reimbursements, contracting, purchasing, auditing, information systems, human resources, clinical, quality assurance, accreditation support, legislative liaison, community networking/partnering, managed care, and patient advocacy.

Comparison of Budgeted to Total Recommended

| Means of Financing & Table of Organization | Existing Oper Budget as of 12/02/03 | Recommended FY 2004-2005 | Total Recommended Over/ Under EOB |
|--|---|-----------------------------|--------------------------------------|
| General Fund (Direct) | \$35,350,302 | \$35,182,983 | (\$167,319) |
| Total Interagency Transfers | 0 | 0 | 0 |
| Fees and Self-generated Revenues | 0 | 0 | 0 |
| Statutory Dedications | 0 | 0 | 0 |
| Interim Emergency Board | 0 | 0 | 0 |
| Federal Funds | 0 | 0 | 0 |
| Total | \$35,350,302 | \$35,182,983 | (\$167,319) |
| T. O. | 0 | 0 | 0 |

Major Changes from Existing Operating Budget

| Justification | Funding Source | Amount |
|--|----------------|--------|
| There are no major changes in funding other than standard statewide adjustments. | | |



Performance Measures

| Objectives | Performance Indicators | Existing Performance Standards FY 2003-2004 | Performance at Executive Budget Level FY 2004-2005 | Executive Budget Over/Under EOB |
|--|--|--|---|------------------------------------|
| To target budgeted dollars for the provision of direct patient care, while ensuring efficient administrative costs by capping HCSD's administrative program at less than 3% of the total operating budget. | Administrative (central office) operating budget as a percent of the total HCSD operating budget | 1% | 1% | 0% |

Earl K Long Medical Center

Acute care teaching hospital located in Baton Rouge providing inpatient and outpatient acute care hospital services, including scheduled clinic and emergency room services; house officer compensation and medical school supervision, and direct patient care physician services; medical support (ancillary) services, and general support services. This facility is certified triennial (three years) by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

Comparison of Budgeted to Total Recommended

| Means of Financing & Table of Organization | Existing Oper Budget as of 12/02/03 | Recommended FY 2004-2005 | Total Recommended Over/ Under EOB |
|--|--|-----------------------------|--------------------------------------|
| General Fund (Direct) | \$10,629,016 | \$8,565,016 | (\$2,064,000) |
| Total Interagency Transfers | 0 | 0 | 0 |
| Fees and Self-generated Revenues | 0 | 0 | 0 |
| Statutory Dedications | 0 | 0 | 0 |
| Interim Emergency Board | 0 | 0 | 0 |
| Federal Funds | 0 | 0 | 0 |
| Total | \$10,629,016 | \$8,565,016 | (\$2,064,000) |
| T. O. | 0 | 0 | 0 |

Major Changes from Existing Operating Budget

| Justification | Funding Source | Amount |
|--|-----------------------|----------------------|
| Transfer of dialysis services from Health Care Services Division (19-610) to Department of Corrections - Dixon Correctional Center (08-409). | General Fund (Direct) | (\$2,064,000) |
| | Total | (\$2,064,000) |

Performance Measures

| Objectives | Performance Indicators | Existing Performance Standards FY 2003-2004 | Performance at Executive Budget Level FY 2004-2005 | Executive Budget Over/Under EOB |
|---|--|--|---|------------------------------------|
| To operate consistently with HCSD's dual mission to provide quality medical care while serving as the state's classroom for medical and clinical education. To continue to provide professional, quality, acute general medical and specialty services in the hospital and maintain the average length of stay of 5.9 days for patients admitted into the hospital. | Average daily census | 108 | 107 | (1) |
| | Emergency department visits | 44,667 | 48,991 | 4,324 |
| | Total outpatient encounters | 167,219 | 180,329 | 13,110 |
| | FTE staff per patient (per adjusted discharge) | 6 | 7 | 0 |
| | Cost per adjusted discharge | \$6,039 | \$6,298 | \$259 |
| | Percentage of readmissions | 7% | 9% | 2% |
| | Patient satisfaction survey rating | 89% | 89% | 0% |



Performance Measures

| Objectives | Performance Indicators | Existing Performance Standards FY 2003-2004 | Performance at Executive Budget Level FY 2004-2005 | Executive Budget Over/Under EOB |
|--|---|--|---|------------------------------------|
| To ensure health care effectiveness with an emphasis on preventive and primary care and continue the development of and increased participation in the current disease management initiatives (diabetes, asthma, cancer, congestive heart failure and HIV) with the expansion of significant per patient improved health outcomes attributed to prevention of complications associated with these conditions and avoiding higher per patient acute care costs. | Hospitalization rate related to congestive heart failure patients | 100 | 124 | 24 |
| | ER visit rate for congestive heart failure patients | 456 | 446 | (10) |
| | Hospitalization rate related to asthma patients | 62 | 47 | (15) |
| | ER visit rate for asthma patients | 618 | 583 | (35) |
| | Percentage of diabetic patients with long term glycemic control | 42% | 40% | (2)% |
| | Hospitalization rate related to HIV patients | 79 | 75 | (4) |
| | Percentage of women 40 years of age or older receiving mammogram testing in the past year | 28% | 25% | (3)% |
| | Percentage of women 18 years of age or older receiving pap smear test in the past year | 29% | 25% | (4)% |

Huey P Long Medical Center

Acute care teaching hospital located in the Alexandria area providing inpatient and outpatient acute care hospital services, including scheduled clinic and emergency room services; house officer compensation and medical school supervision, and direct patient care physician services; medical support (ancillary) services, and general support services. This facility is certified triennial (three years) by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

Comparison of Budgeted to Total Recommended

| Means of Financing & Table of Organization | Existing Oper Budget as of 12/02/03 | Recommended FY 2004-2005 | Total Recommended Over/ Under EOB |
|--|--|-----------------------------|--------------------------------------|
| General Fund (Direct) | \$3,306,836 | \$3,306,836 | \$0 |
| Total Interagency Transfers | 0 | 0 | 0 |
| Fees and Self-generated Revenues | 0 | 0 | 0 |
| Statutory Dedications | 0 | 0 | 0 |
| Interim Emergency Board | 0 | 0 | 0 |
| Federal Funds | 0 | 0 | 0 |
| Total | \$3,306,836 | \$3,306,836 | \$0 |
| T. O. | 0 | 0 | 0 |

Major Changes from Existing Operating Budget

| Justification | Funding Source | Amount |
|--|----------------|--------|
| There are no major changes in funding other than standard statewide adjustments. | | |



Performance Measures

| Objectives | Performance Indicators | Existing Performance Standards FY 2003-2004 | Performance at Executive Budget Level FY 2004-2005 | Executive Budget Over/Under EOB |
|--|---|--|---|------------------------------------|
| To operate consistently with HCSD's dual mission to provide quality medical care while serving as the state's classroom for medical and clinical education. To continue to provide professional, quality, acute general medical and specialty services to patients | Average daily census | 39 | 44 | 5 |
| | Emergency department visits | 32,596 | 43,454 | 10,858 |
| | Total outpatient encounters | 104,251 | 111,648 | 7,397 |
| | FTE staff per patient (per adjusted discharge) | 6 | 6 | 1 |
| | Cost per adjusted discharge | \$4,995 | \$5,391 | \$396 |
| | Percentage of Readmissions | 8% | 9% | 1% |
| | Patient satisfaction survey rating | 86% | 86% | 0% |
| To ensure health care effectiveness with an emphasis on preventive and primary care and continue the development of and increased participation in the current disease management initiatives (diabetes, asthma, cancer, congestive heart failure and HIV) with the expansion of significant per patient improved health outcomes attributed to prevention of complications associated with these conditions and avoiding higher per patient acute care costs. | Hospitalization rate related to congestive heart failure patients | 179 | 143 | (36) |
| | ER visit rate for congestive heart failure patients | 472 | 407 | (65) |
| | Hospitalization rate related to asthma patients | 72 | 56 | (16) |
| | ER visit rate for asthma patients | 563 | 558 | (5) |
| | Percentage of diabetic patients with long term glycemic control | 47% | 46% | (1)% |
| | Hospitalization rate related to HIV patients | 38 | 47 | 9 |
| | Percentage of women 40 years of age or older receiving mammogram testing in the past year | 26% | 25% | (1)% |
| | Percentage of women 18 years of age or older receiving pap smear test in the past year | 32% | 35% | 3% |

University Medical Center

Acute care teaching hospital located in Lafayette providing inpatient and outpatient acute care hospital services, including scheduled clinic and emergency room services; house officer compensation and medical school supervision, and direct patient care physician services; medical support (ancillary) services, and general support services. This facility is certified triennial (three years) by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

Comparison of Budgeted to Total Recommended

| Means of Financing & Table of Organization | Existing Oper Budget as of 12/02/03 | Recommended FY 2004-2005 | Total Recommended Over/ Under EOB |
|--|--|-----------------------------|--------------------------------------|
| General Fund (Direct) | \$1,127,672 | \$1,127,672 | \$0 |
| Total Interagency Transfers | 0 | 0 | 0 |
| Fees and Self-generated Revenues | 0 | 0 | 0 |
| Statutory Dedications | 0 | 0 | 0 |
| Interim Emergency Board | 0 | 0 | 0 |
| Federal Funds | 0 | 0 | 0 |
| Total | \$1,127,672 | \$1,127,672 | \$0 |
| T. O. | 0 | 0 | 0 |



Major Changes from Existing Operating Budget

| Justification | Funding Source | Amount |
|--|----------------|--------|
| There are no major changes in funding other than standard statewide adjustments. | | |

Performance Measures

| Objectives | Performance Indicators | Existing Performance Standards FY 2003-2004 | Performance at Executive Budget Level FY 2004-2005 | Executive Budget Over/Under EOB |
|--|---|--|---|------------------------------------|
| To operate consistently with HCSD's dual mission to provide quality medical care while serving as the state's classroom for medical and clinical education. To continue to provide professional, quality, acute general medical and specialty services in the hospital and maintain the average length of stay of 5.7 days for patients admitted into the hospital. | Average daily census | 72 | 72 | 0 |
| | Emergency department visits | 40,329 | 43,474 | 3,145 |
| | Total outpatient encounters | 156,149 | 165,984 | 9,835 |
| | FTE staff per patient (per adjusted discharge) | 6 | 7 | 2 |
| | Cost per adjusted discharge | \$6,076 | \$6,293 | \$217 |
| | Percentage of Readmissions | 7% | 9% | 3% |
| | Patient satisfaction survey rating | 88% | 88% | 0% |
| To ensure health care effectiveness with an emphasis on preventive and primary care and continue the development of and increased participation in the current disease management initiatives (diabetes, asthma, cancer, congestive heart failure and HIV) with the expansion of significant per patient improved health outcomes attributed to prevention of complications associated with these conditions and avoiding higher per patient acute care costs. | Hospitalization rate related to congestive heart failure patients | 126 | 113 | (13) |
| | ER visit rate for congestive heart failure patients | 275 | 189 | (86) |
| | Hospitalization rate related to asthma patients | 74 | 63 | (11) |
| | ER visit rate for asthma patients | 396 | 342 | (54) |
| | Percentage of diabetic patients with long term glycemic control | 54% | 39% | (15)% |
| | Hospitalization rate related to HIV patients | 40 | 71 | 31 |
| | Percentage of women 40 years of age or older receiving mammogram testing in the past year | 26% | 36% | 10% |
| | Percentage of women 18 years of age or older receiving pap smear test in the past year | 40% | 32% | (8)% |

W.O. Moss Regional Medical Center

Acute care teaching hospital located in Lake Charles providing inpatient and outpatient acute care hospital services, including scheduled clinic and emergency room services; direct patient care physician services; medical support (ancillary) services, and general support services. This facility is certified annually by the Centers for Medicare and Medicaid Services (CMS).



Comparison of Budgeted to Total Recommended

| Means of Financing & Table of Organization | Existing Oper Budget as of 12/02/03 | Recommended FY 2004-2005 | Total Recommended Over/Under EOB |
|--|-------------------------------------|--------------------------|----------------------------------|
| General Fund (Direct) | \$815,340 | \$815,340 | \$0 |
| Total Interagency Transfers | 0 | 0 | 0 |
| Fees and Self-generated Revenues | 0 | 0 | 0 |
| Statutory Dedications | 0 | 0 | 0 |
| Interim Emergency Board | 0 | 0 | 0 |
| Federal Funds | 0 | 0 | 0 |
| Total | \$815,340 | \$815,340 | \$0 |
| T. O. | 0 | 0 | 0 |

Major Changes from Existing Operating Budget

| Justification | Funding Source | Amount |
|---|----------------|--------|
| There are no major changes in funding other than standard statewide adjustments. | | |

Performance Measures

| Objectives | Performance Indicators | Existing Performance Standards FY 2003-2004 | Performance at Executive Budget Level FY 2004-2005 | Executive Budget Over/Under EOB |
|--|---|---|--|---------------------------------|
| To operate consistently with HCSD's dual mission to provide quality medical care while serving as the state's classroom for medical and clinical education. To continue to provide professional, quality, acute general medical and specialty services in the hospital and maintain the average length of stay of 5.7 days for patients admitted into the hospital. | Average daily census | 25 | 24 | (1) |
| | Emergency department visits | 28,298 | 24,612 | (3,686) |
| | Total outpatient encounters | 85,600 | 86,436 | 836 |
| | FTE staff per patient (per adjusted discharge) | 6 | 6 | (0) |
| | Cost per adjusted discharge | \$5,391 | \$5,056 | (\$335) |
| | Percentage of Readmissions | 11% | 11% | 0% |
| | Patient satisfaction survey rating | 87% | 87% | 0% |
| To ensure health care effectiveness with an emphasis on preventive and primary care and continue the development of and increased participation in the current disease management initiatives (diabetes, asthma, cancer, congestive heart failure and HIV) with the expansion of significant per patient improved health outcomes attributed to prevention of complications associated with these conditions and avoiding higher per patient acute care costs. | Hospitalization rate related to congestive heart failure patients | 104 | 58 | (46) |
| | ER visit rate for congestive heart failure patients | 415 | 429 | 14 |
| | Hospitalization rate related to asthma patients | 38 | 33 | (5) |
| | ER visit rate for asthma patients | 572 | 622 | 50 |
| | Percentage of diabetic patients with long term glycemic control | 52% | 45% | (7)% |
| | Hospitalization rate related to HIV patients | 73 | 34 | (39) |
| | Percentage of women 40 years of age or older receiving mammogram testing in the past year | 42% | 41% | (1)% |
| | Percentage of women 18 years of age or older receiving pap smear test in the past year | 20% | 18% | (2)% |



Lallie Kemp Regional Medical Center

Acute care teaching hospital located in Independence providing inpatient and outpatient acute care hospital services, including scheduled clinic and emergency room services; direct patient care physician services; medical support (ancillary) services, and general support services. This facility is certified triennial (three years) by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

Comparison of Budgeted to Total Recommended

| Means of Financing & Table of Organization | Existing Oper Budget as of 12/02/03 | Recommended FY 2004-2005 | Total Recommended Over/Under EOB |
|--|-------------------------------------|--------------------------|----------------------------------|
| General Fund (Direct) | \$664,334 | \$664,334 | \$0 |
| Total Interagency Transfers | 0 | 0 | 0 |
| Fees and Self-generated Revenues | 0 | 0 | 0 |
| Statutory Dedications | 0 | 0 | 0 |
| Interim Emergency Board | 0 | 0 | 0 |
| Federal Funds | 0 | 0 | 0 |
| Total | \$664,334 | \$664,334 | \$0 |
| T. O. | 0 | 0 | 0 |

Major Changes from Existing Operating Budget

| Justification | Funding Source | Amount |
|--|----------------|--------|
| There are no major changes in funding other than standard statewide adjustments. | | |

Performance Measures

| Objectives | Performance Indicators | Existing Performance Standards FY 2003-2004 | Performance at Executive Budget Level FY 2004-2005 | Executive Budget Over/Under EOB |
|---|--|---|--|---------------------------------|
| To operate consistently with HCSD's dual mission to provide quality medical care while serving as the state's classroom for medical and clinical education. To continue to provide professional, quality, acute general medical and specialty services in the hospital and maintain the average length of stay of 4.6 days for patients admitted into the hospital. | Average daily census | 23 | 18 | (5) |
| | Emergency department visits | 32,000 | 30,089 | (1,911) |
| | Total outpatient encounters | 120,000 | 118,370 | (1,630) |
| | FTE staff per patient (per adjusted discharge) | 7 | 9 | 2 |
| | Cost per adjusted discharge | \$4,776 | \$6,777 | \$2,001 |
| | Percentage of Readmissions | 9% | 9% | 0% |
| | Patient satisfaction survey rating | 90% | 90% | 0% |



Performance Measures

| Objectives | Performance Indicators | Existing Performance Standards FY 2003-2004 | Performance at Executive Budget Level FY 2004-2005 | Executive Budget Over/Under EOB |
|--|---|--|---|------------------------------------|
| To ensure health care effectiveness with an emphasis on preventive and primary care and continue the development of and increased participation in the current disease management initiatives (diabetes, asthma, cancer, congestive heart failure and HIV) with the expansion of significant per patient improved health outcomes attributed to prevention of complications associated with these conditions and avoiding higher per patient acute care costs. | Hospitalization rate related to congestive heart failure patients | 210 | 179 | (31) |
| | ER visit rate for congestive heart failure patients | 330 | 290 | (40) |
| | Hospitalization rate related to asthma patients | 64 | 46 | (18) |
| | ER visit rate for asthma patients | 452 | 376 | (76) |
| | Percentage of diabetic patients with long term glycemic control | 55% | 49% | (6)% |
| | Hospitalization rate related to HIV patients | 87 | 97 | 10 |
| | Percentage of women 40 years of age or older receiving mammogram testing in the past year | 28% | 32% | 4% |
| | Percentage of women 18 years of age or older receiving pap smear test in the past year | 27% | 25% | (2)% |

Washington-St Tammany Regional Medical Center

Acute care teaching hospital located in Bogalusa providing inpatient and outpatient acute care hospital services, including scheduled clinic and emergency room services; direct patient care physician services; medical support (ancillary) services, and general support services. This facility is certified triennial (three years) by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

Comparison of Budgeted to Total Recommended

| Means of Financing & Table of Organization | Existing Oper Budget as of 12/02/03 | Recommended FY 2004-2005 | Total Recommended Over/ Under EOB |
|--|--|-----------------------------|--------------------------------------|
| General Fund (Direct) | \$534,163 | \$534,163 | \$0 |
| Total Interagency Transfers | 0 | 0 | 0 |
| Fees and Self-generated Revenues | 0 | 0 | 0 |
| Statutory Dedications | 0 | 0 | 0 |
| Interim Emergency Board | 0 | 0 | 0 |
| Federal Funds | 0 | 0 | 0 |
| Total | \$534,163 | \$534,163 | \$0 |
| T. O. | 0 | 0 | 0 |

Major Changes from Existing Operating Budget

| Justification | Funding Source | Amount |
|--|----------------|--------|
| There are no major changes in funding other than standard statewide adjustments. | | |



Performance Measures

| Objectives | Performance Indicators | Existing Performance Standards FY 2003-2004 | Performance at Executive Budget Level FY 2004-2005 | Executive Budget Over/Under EOB |
|--|---|--|---|------------------------------------|
| To operate consistently with HCSD's dual mission to provide quality medical care while serving as the state's classroom for medical and clinical education. To continue to provide professional, quality, acute general medical and specialty services in the hospital and maintain the average length of stay of 6.0 days for patients admitted into the hospital. | Average daily census | 53 | 55 | 2 |
| | Emergency department visits | 30,000 | 29,585 | (415) |
| | Total outpatient encounters | 65,000 | 73,886 | 8,886 |
| | FTE staff per patient (per adjusted discharge) | 6 | 7 | 1 |
| | Cost per adjusted discharge | \$4,396 | \$5,290 | \$894 |
| | Percentage of Readmissions | 9% | 9% | 0% |
| | Patient satisfaction survey rating | 93% | 93% | 0% |
| To ensure health care effectiveness with an emphasis on preventive and primary care and continue the development of and increased participation in the current disease management initiatives (diabetes, asthma, cancer, congestive heart failure and HIV) with the expansion of significant per patient improved health outcomes attributed to prevention of complications associated with these conditions and avoiding higher per patient acute care costs. | Hospitalization rate related to congestive heart failure patients | 209 | 179 | (30) |
| | ER visit rate for congestive heart failure patients | 403 | 290 | (113) |
| | Hospitalization rate related to asthma patients | 84 | 46 | (38) |
| | ER visit rate for asthma patients | 749 | 376 | (373) |
| | Percentage of diabetic patients with long term glycemic control | 49% | 44% | (5)% |
| | Hospitalization rate related to HIV patients | 55 | 97 | 42 |
| | Percentage of women 40 years of age or older receiving mammogram testing in the past year | 3% | 32% | 29% |
| | Percentage of women 18 years of age or older receiving pap smear test in the past year | 29% | 22% | (7)% |

Leonard J Chabert Medical Center

Acute care teaching hospital located in Houma providing inpatient and outpatient acute care hospital services, including scheduled clinic and emergency room services; house officer compensation and medical school supervision, and direct patient care physician services; medical support (ancillary) services, and general support services. This facility is certified triennial (three years) by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

Comparison of Budgeted to Total Recommended

| Means of Financing & Table of Organization | Existing Oper Budget as of 12/02/03 | Recommended FY 2004-2005 | Total Recommended Over/ Under EOB |
|--|--|-----------------------------|--------------------------------------|
| General Fund (Direct) | \$602,717 | \$602,717 | \$0 |
| Total Interagency Transfers | 0 | 0 | 0 |
| Fees and Self-generated Revenues | 0 | 0 | 0 |
| Statutory Dedications | 0 | 0 | 0 |
| Interim Emergency Board | 0 | 0 | 0 |
| Federal Funds | 0 | 0 | 0 |
| Total | \$602,717 | \$602,717 | \$0 |
| T. O. | 0 | 0 | 0 |



Major Changes from Existing Operating Budget

| Justification | Funding Source | Amount |
|---|----------------|--------|
| There are no major changes in funding other than standard statewide adjustments. | | |

Performance Measures

| Objectives | Performance Indicators | Existing Performance Standards FY 2003-2004 | Performance at Executive Budget Level FY 2004-2005 | Executive Budget Over/Under EOB |
|--|---|--|---|------------------------------------|
| To operate consistently with HCSD's dual mission to provide quality medical care while serving as the state's classroom for medical and clinical education. To continue to provide professional, quality, acute general medical and specialty services in the hospital and maintain the average length of stay of 4.7 days for patients admitted into the hospital. | Average daily census | 73 | 69 | (4) |
| | Emergency department visits | 53,909 | 49,042 | (4,867) |
| | Total outpatient encounters | 163,837 | 167,047 | 3,210 |
| | FTE staff per patient (per adjusted discharge) | 7 | 7 | 0 |
| | Cost per adjusted discharge | \$5,419 | \$5,460 | \$41 |
| | Percentage of Readmissions | 10% | 11% | 1% |
| | Patient satisfaction survey rating | 92% | 92% | 0% |
| To ensure health care effectiveness with an emphasis on preventive and primary care and continue the development of and increased participation in the current disease management initiatives (diabetes, asthma, cancer, congestive heart failure and HIV) with the expansion of significant per patient improved health outcomes attributed to prevention of complications associated with these conditions and avoiding higher per patient acute care costs. | Hospitalization rate related to congestive heart failure patients | 161 | 233 | 72 |
| | ER visit rate for congestive heart failure patients | 333 | 288 | (45) |
| | Hospitalization rate related to asthma patients | 78 | 64 | (14) |
| | ER visit rate for asthma patients | 392 | 440 | 48 |
| | Percentage of diabetic patients with long term glycemic control | 53% | 48% | (5)% |
| | Hospitalization rate related to HIV patients | 136 | 101 | (35) |
| | Percentage of women 40 years of age or older receiving mammogram testing in the past year | 46% | 46% | 0% |
| | Percentage of women 18 years of age or older receiving pap smear test in the past year | 39% | 36% | (3)% |

Charity Hospital & Medical Center of Louisiana

Acute care teaching hospital located in New Orleans providing inpatient and outpatient acute care hospital services, including scheduled clinic and emergency room services; house officer compensation and medical school supervision, and direct patient care physician services; medical support (ancillary) services, and general support services. This facility is certified triennial (three years) by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

Comparison of Budgeted to Total Recommended

| Means of Financing & Table of Organization | Existing Oper Budget as of 12/02/03 | Recommended FY 2004-2005 | Total Recommended Over/ Under EOB |
|--|--|-----------------------------|--------------------------------------|
| General Fund (Direct) | \$15,090,654 | \$14,848,704 | (\$241,950) |
| Total Interagency Transfers | 0 | 0 | 0 |
| Fees and Self-generated Revenues | 0 | 0 | 0 |
| Statutory Dedications | 0 | 0 | 0 |
| Interim Emergency Board | 0 | 0 | 0 |
| Federal Funds | 0 | 0 | 0 |
| Total | \$15,090,654 | \$14,848,704 | (\$241,950) |



Comparison of Budgeted to Total Recommended

| Means of Financing & Table of Organization | Existing Oper Budget as of 12/02/03 | Recommended FY 2004-2005 | Total Recommended Over/Under EOB |
|--|-------------------------------------|--------------------------|----------------------------------|
| T. O. | 0 | 0 | 0 |

Major Changes from Existing Operating Budget

| Justification | Funding Source | Amount |
|--|-----------------------|--------------------|
| Transfer of dialysis services from Health Care Services Division (19-610) to Department of Corrections - Dixon Correctional Center (08-409). | General Fund (Direct) | (\$241,950) |
| | Total | (\$241,950) |

Performance Measures

| Objectives | Performance Indicators | Existing Performance Standards FY 2003-2004 | Performance at Executive Budget Level FY 2004-2005 | Executive Budget Over/Under EOB |
|--|---|---|--|---------------------------------|
| To operate consistently with HCSD's dual mission to provide quality medical care while serving as the state's classroom for medical and clinical education. To continue to provide professional, quality, acute general medical and specialty services in the hospital and maintain the average length of stay of 6.2 days for patients admitted into the hospital. | Average daily census | 396 | 408 | 12 |
| | Emergency department visits | 148,678 | 143,064 | (5,614) |
| | Total outpatient encounters | 451,668 | 477,211 | 25,543 |
| | FTE staff per patient (per adjusted discharge) | 11 | 11 | 0 |
| | Cost per adjusted discharge | \$10,845 | \$11,146 | \$301 |
| | Percentage of Readmissions | 11% | 12% | 1% |
| | Patient satisfaction survey rating | 89% | 89% | 0% |
| To ensure health care effectiveness with an emphasis on preventive and primary care and continue the development of and increased participation in the current disease management initiatives (diabetes, asthma, cancer, congestive heart failure and HIV) with the expansion of significant per patient improved health outcomes attributed to prevention of complications associated with these conditions and avoiding higher per patient acute care costs. | Hospitalization rate related to congestive heart failure patients | 391 | 395 | 4 |
| | ER visit rate for congestive heart failure patients | 413 | 368 | (45) |
| | Hospitalization rate related to asthma patients | 95 | 91 | (4) |
| | ER visit rate for asthma patients | 475 | 565 | 90 |
| | Percentage of diabetic patients with long term glycemic control | 38% | 31% | (7)% |
| | Hospitalization rate related to HIV patients | 98 | 91 | (7) |
| | Percentage of women 40 years of age or older receiving mammogram testing in the past year | 26% | 27% | 1% |
| | Percentage of women 18 years of age or older receiving pap smear test in the past year | 26% | 22% | (4)% |



Discretionary and Non-discretionary Expenditures Total Recommended Fiscal Year 2004 – 2005

| LA Health Care Services Division | Description | General Fund | Total | T. O. |
|------------------------------------|--|---------------------|---------------------|----------|
| DISCRETIONARY | | | | |
| Discretionary/Non-Exempt | Executive Administration and General Support | \$35,182,983 | \$35,182,983 | 0 |
| | Earl K Long Medical Center | 362,232 | 362,232 | 0 |
| | Huey P Long Medical Center | 307,075 | 307,075 | 0 |
| | University Medical Center | 313,574 | 313,574 | 0 |
| | W.O. Moss Regional Medical Center | 127,327 | 127,327 | 0 |
| | Lallie Kemp Regional Medical Center | 150,005 | 150,005 | 0 |
| | Washington-St Tammany Regional Medical Center | 106,189 | 106,189 | 0 |
| | Leonard J Chabert Medical Center | 115,589 | 115,589 | 0 |
| | Charity Hospital & Medical Center of Louisiana | 1,484,242 | 1,484,242 | 0 |
| | Total | \$38,149,216 | \$38,149,216 | 0 |
| TOTAL DISCRETIONARY | | \$38,149,216 | \$38,149,216 | 0 |
| NON-DISCRETIONARY | | | | |
| ND - Unavoidable Obligation | Earl K Long Medical Center | \$8,202,784 | \$8,202,784 | 0 |
| | Huey P Long Medical Center | 2,999,761 | 2,999,761 | 0 |
| | University Medical Center | 814,098 | 814,098 | 0 |
| | W.O. Moss Regional Medical Center | 688,013 | 688,013 | 0 |
| | Lallie Kemp Regional Medical Center | 514,329 | 514,329 | 0 |
| | Washington-St Tammany Regional Medical Center | 427,974 | 427,974 | 0 |
| | Leonard J Chabert Medical Center | 487,128 | 487,128 | 0 |
| | Charity Hospital & Medical Center of Louisiana | 13,364,462 | 13,364,462 | 0 |
| | Total | \$27,498,549 | \$27,498,549 | 0 |
| TOTAL NON-DISCRETIONARY | | \$27,498,549 | \$27,498,549 | 0 |
| Grand Total | | \$65,647,765 | \$65,647,765 | 0 |



